

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND																							
1 Date of Request: _____		2 Serial/Patent # <u>10/518423</u>																					
3 Please refund the following fee(s): <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="width: 10px; text-align: center;"><input checked="" type="checkbox"/></td><td style="padding: 2px;">Filing</td></tr> <tr><td style="text-align: center;"><input type="checkbox"/></td><td style="padding: 2px;">Amendment</td></tr> <tr><td style="text-align: center;"><input type="checkbox"/></td><td style="padding: 2px;">Extension of Time</td></tr> <tr><td style="text-align: center;"><input type="checkbox"/></td><td style="padding: 2px;">Notice of Appeal/Appeal</td></tr> <tr><td style="text-align: center;"><input type="checkbox"/></td><td style="padding: 2px;">Petition</td></tr> <tr><td style="text-align: center;"><input type="checkbox"/></td><td style="padding: 2px;">Issue</td></tr> <tr><td style="text-align: center;"><input type="checkbox"/></td><td style="padding: 2px;">Cert of Correction/Terminal Disc.</td></tr> <tr><td style="text-align: center;"><input type="checkbox"/></td><td style="padding: 2px;">Maintenance</td></tr> <tr><td style="text-align: center;"><input type="checkbox"/></td><td style="padding: 2px;">Assignment</td></tr> <tr><td style="text-align: center;"><input type="checkbox"/></td><td style="padding: 2px;">Other</td></tr> </table>	<input checked="" type="checkbox"/>	Filing	<input type="checkbox"/>	Amendment	<input type="checkbox"/>	Extension of Time	<input type="checkbox"/>	Notice of Appeal/Appeal	<input type="checkbox"/>	Petition	<input type="checkbox"/>	Issue	<input type="checkbox"/>	Cert of Correction/Terminal Disc.	<input type="checkbox"/>	Maintenance	<input type="checkbox"/>	Assignment	<input type="checkbox"/>	Other	4 PAPER NUMBER <div style="border: 1px solid black; text-align: center; padding: 5px;">1</div>	5 DATE FILED <div style="border: 1px solid black; text-align: center; padding: 5px;">12/17/04</div>	6 AMOUNT <div style="border: 1px solid black; text-align: center; padding: 5px;">\$ 200</div>
<input checked="" type="checkbox"/>	Filing																						
<input type="checkbox"/>	Amendment																						
<input type="checkbox"/>	Extension of Time																						
<input type="checkbox"/>	Notice of Appeal/Appeal																						
<input type="checkbox"/>	Petition																						
<input type="checkbox"/>	Issue																						
<input type="checkbox"/>	Cert of Correction/Terminal Disc.																						
<input type="checkbox"/>	Maintenance																						
<input type="checkbox"/>	Assignment																						
<input type="checkbox"/>	Other																						
<div style="background-color: #cccccc; height: 40px; width: 100%;"></div>		7 TOTAL AMOUNT OF REFUND <div style="border: 1px solid black; text-align: center; padding: 5px;">\$ 200</div>																					
10 REASON: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		8 TO BE REFUNDED BY: <div style="border: 1px solid black; padding: 5px;"> <input checked="" type="checkbox"/> Treasury Check  <input checked="" type="checkbox"/> Credit Deposit A/C #:           </div>																					
<input checked="" type="checkbox"/> Overpayment <input type="checkbox"/> Duplicate Payment <input type="checkbox"/> No Fee Due (Explanation): _____		9 <div style="border: 1px solid black; display: inline-block; padding: 5px;">             15--0508           </div>																					
11 REFUND REQUESTED BY: _____																							
TYPED/PRINTED NAME: <u>A Johnson</u>		TITLE: <u>Paralegal</u>																					
SIGNATURE: <u>A Johnson</u>		PHONE: <u>308-9140</u>																					
OFFICE: <u>DO-EO</u>																							
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: APPROVED: _____ DATE: _____																							

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*

PATENT APPLICATION SERIAL NO. 10/518423

U.S. DEPARTMENT OF COMMERCE  
PATENT AND TRADEMARK OFFICE  
FEE RECORD SHEET

12/29/2004 MKAYPAGH 00000065 10518423

01 FC:2631	150.00 OP ✓
02 FC:2632	250.00 OP ✓
03 FC:2633	100.00 OP ✓
04 FC:2615	375.00 OP ✓
05 FC:2614	100.00 OP ✓

Repln. Ref: 05/23/2005 AJOHNS02 0010434400  
DAH:150508 Name/Number:10518423  
FC: 9204 \$200.00 CR

05/23/2005 AJOHNS02 00000006 10518423

01 FC:2643

50.00 OP ✓

02 FC:2632

-250.00 OP

PTO-1556  
(5/87)